PTO/SB/17 (10-08)

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FEE TRANSMITTAL FOR FY 2009 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (6) 490.00 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (6) 490.00 Attorney Docket No. 1551-0158PUS1 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identity): X Deposit Account Deposit Account Number: 02-2448 Per baposit Account Number: 02-2448 Per paid (5) Per (6) Per (8					Complete if Known					
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Application Type Fee CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity 1. Small Entity 1. Signal Entity 1. S					First Named Inventor Masaharu UED)A		
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Reissue 330 165 540 270 650 325 Provisional 220 110 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Registration No. (AutometylAgent) AutometylAgent) Autome	1 ~									
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